FOR INSTRUCTIONS, SEE BACK OF FORM

File with: Iowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

DISCLOSURE SUMMARY PAGE

Effective January 1, 2010, all statements and reports filed by new committees APAIGN DISCLOSURE BO statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State

Reset Form

Parties must be filed electronically.

2010 JAN 19 AM 11: 54

COMMITTEE NAME (Must be same as on Statement of Organiza	ation)			
COMMITTEE TO ELECT WES WHITEAD		FORM		
IMPORTANT: Indicate by # type of committee you are reporting for: [I (1)Statewide/Legislative/Judge Standing for Retention Candidate (2)St (4)County Central Committee (5)County Candidate (6)City Candidate Subdivision Candidate (8)County PAC (9)City PAC (10)School Board 11) Local Ballot Issue	(7) School Board or Other Political	(<u>É</u>	DR-2 Rev. 12/2009) or Office Use On omm. #	DISCLOSURE REPORT
CANDIDATE COMMITTEES ONLY:				
Candidate Name MR. WES WHITEAD	Political Party (if applicable) DEMOCRAT	s	canned	
Office Sought LEGISLATOR	District (if Senate or House) IA HOUSE DIST. 1	1 1		
Late reports are subject to possible civil and criminal penalties. Pursuar candidate's committee, and the chairperson, for any other type of comm	nt to lowa Code sections 68B.32A nittee, is the individual responsible	(7) and 68. for filing ti	A.401(3), the car imely and accura	ndidate, for a te reports.
1/2/2	712/255-8094		1/15/2	۵ _ا ن
SIGNATURE OF PERSON FILING REPORT	TELEPHONE		DATE S	GNED
I AM FILING A 1/19/10	DEDORT FOR (4) ELECTION	//2\NON	ELECTION VE	\D
(report date)	REPORT FOR (1) ELECTION Indicate by #	` 	ELECTION TEA	AR.
, , ,	indicate by a	* E		
CHECK IF AMENDMENT TO REPORT DATED		Local Com	mittees, enter Dat	e of Election
☐ Check if this is final (termination) report and attach Notice of Dis (You must continue to file reports until a DR-3 is filed.)	ssolution Form DR-3.		ocal Committees, tion is held	enter County in
STATEMENT OF CASH ON HAND	0.000			
CASH ON HAND at the beginning of the reporting period. (Total o committee. This amount MUST be the same as the cash of the last reporting period or must be zero if this is first re	on hand at the end	\$	11,409.47	
ADD TOTAL MONEY TAKEN IN THIS PERIOD				
Schedule A: Cash Contributions total (Attach Schedule A	A) (*also see in-kind below)		1,050.00	
Schedule F: Loans Received total (Attach Schedule F)			0.00	
Schedule H: Total Sales of Campaign Property (Attach S	Schedule H)		0.00	
(Schedule H applies to Candidates' Committee	ees Only)			
	SUB-TOTAL	\$	12,459.47	
SUBTRACT TOTAL MONEY SPENT THIS PERIOD				
Schedule B: Expenditures total (Attach Schedule B) (**al	so see debts and loans below)		10,600.00	
Schedule F: Loan Repayments total (Attach Schedule F)			0.00	
CASH ON HAND at the end of this reporting period (if final report b	palance must be zero)	\$	1,859.47	
**UNPAID BILLS (From Schedule D - Attach Schedule D)		\$	0.00	
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule	E)	\$	0.00	
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)\$			0.00	
CONSULTANT BREAKDOWN (Schedule G Attached?)			YES	NO
CANDIDATE COMMITTEES ONLY:				
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach S	chedule H)	\$	0.00	

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
COMMITTEE TO ELECT WES WHITEAD

SCHEDULE	
A (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
8/1/09	ID# ₆₀₈₄ CK# ₈₅₃	IOWA STATE UAW-PAC 680 BARCLAY BLDV. LINCOLNSHIRE, IL 60069		\$500.00	
11/15/09	1D# 6058 CK# 456	IOWA CHIROPRACTIC SOCIETY - PAC 100 EAST GRAND AVENUE, SUITE 240 DES MOINES, IA 50309		100.00	
11/15/09	ID# CK#	MR. DAVID L. PALMER 213 SW FLYNN DRIVE ANKENY, IA 50023		50.00	
12/30/09	1D# 6046 CK# 4574	JUSTICE FOR ALL PAC 218 - 6TH AVE., SUITE 526 DES MOINES, IA 50309		100.00	
12/30/09	CK# ₁₉₀₄	HOMEBUILDERS ASSOCIATION - PAC 3072 -104TH STREET URBANDALE, IA 50032		100.00	
12/30/09	ID# 6067 CK# 4159	IOWA HEALTH PAC 6750 WESTOWN PARKWAY, #100 W. DES MOINES, IA 50266		200.00	
	ID#				
	ID# CK#				
	ID#				
	CK#				
	ID#				
			SUB-TOTAL	1.050.00	

TOTAL (if last page of this schedule)

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1 (for Schedule A)

1,050.00

1,050.00

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES	
CHECK THIS BOX IF AMENDING FORM		

COMMITTEE NAME	(Must be same as or	n Statement of Organization)
COMMITTEE TO I	ELECT WES WHITI	EAD

DES MOINES, IA 50321	DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
100.00 1	2/10/09		5661 FLEUR DRIVE	Contribution	\$ 10,000.00
Solution Solution	2/10/09		5661 FLEUR DRIVE	Contribution	100.00
CK# ID# CK# ID# CK# ID# CK# ID# CK# ID# CK# ID# CK#	8/4/09		5661 FLEUR DRIVE		500.00
ID# CK# ID# ID# CK# ID# ID# CK# ID# ID# ID# ID# ID# ID# ID# ID# ID# ID		ID#			
CK# ID# CK# ID# CK# ID# CK# CK# CK#		CK#			
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ID# CK# ID# CK#		ID#			
CK# ID# CK#		CK#			
ID# CK#		ID#			
CK#		CK#			
		ID#			
SUB-TOTAL \$ 10.600.00		CK#			
	-			SUB-TOTA	\$ 10,600.00

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

	1		1
Page		of	

TOTAL (if last page of this schedule)

\$ 10,600.00